



2005 White House Conference on Aging
Implementation Strategy Highlight Report

12/14/2005

Policy Track Presentation Outline

- Moderator: Dorcas R. Hardy, Chairman, WHCoA Policy Committee
- Workplace of the Future
Presenter: Tom Gallagher
- Our Community
Presenter: Clayton Fong and Bob Blancato
- Planning Along the Lifespan
Presenter: Senator Larry Craig and Barbara Kennelly
- Health and Long Term Living
Presenter: Dr. Alejandro Aparicio
- Civic and Social Engagement
Presenter: Mel Woods
- Technology and Innovation in the Marketplace
Presenter: Tom Gallagher
- Cross-Cutting Issues
Presenter: Gail Hunt

Workplace of the Future

Workplace of the Future

Resolutions:

Remove barriers to the retention and hiring of older workers, including age discrimination

Promote incentives for older workers to continue working and improve employment training and retraining programs to better serve older workers

Workplace of the Future

- **Held two sessions that included both resolutions**
- **Each group had broad representation from the non-profit sector, various government institutions, and business and industry**
- **Both groups were very articulate and well-versed in the area of older workers and produced several innovative strategies**

Workplace of the Future

- **Morning and afternoon sessions concurred that they would like the implementation strategies to apply to both resolutions**

Workplace of the Future

- **Examples of implementation strategies that received the strongest support include:**
 - **Re-authorize Title V of the Older Americans Act, (the Senior Community Service Employment Program) which provides part-time employment opportunities for low-income individuals over the age of 55, to ensure the oldest, poorest and least skilled older workers do not fall through the cracks**

Workplace of the Future

- **Eliminate the income eligibility requirement in Title V and encourage greater collaboration with the Workforce Investment Act (WIA) programs that promote training, education, health and support for older workers, so as to provide more effective outcomes**

Workplace of the Future

- **Create a Frontier Section within Title V of the Older Americans Act to provide more flexibility for rural communities**
 - **Include distance learning options for education and training support, as well as work opportunities in rural communities**

Workplace of the Future

- **Remove impediments to phased and flexible retirement options to encourage multiple work options for older workers and businesses, for example:**
- **Permit pension payments to older workers who want to continue working, but wish to cut back on hours**
 - **Assess ERISA, ADEA and IRS provisions that discourage continued employment of older workers**

Workplace of the Future

- **Other examples of strategies that had strong support, include:**
 - **Provide greater access for educating and training older workers via education grants, tuition waivers and innovative financing mechanisms, such as a training education 401K plan**
 - **Create a Task Force within the Department of Labor that would focus on issues surrounding older workers**

Workplace of the Future

- **Examples of strategies that had considerable support, include:**
 - **Educate employers on the increasing value of older workers, particularly in light of Baby Boomer retirements and the need for flexible work arrangements to retain such workers**
 - **Encourage employers to provide employment benefits that assist in retention, such as pre-retirement training and financial planning, healthcare insurance, leisure and work options to re-career, and flex-time and job sharing options**

Our Community

Our Community:

R. 17: Reauthorize the Older Americans Act

- **Provide a substantial increase in Older Americans Act funding**
- **Legislative advocacy: educate, advocate, obtain Results**
- **Create an new title within OAA to authorize SUAs, AAAs, and Title VI Native Americans to help communities prepare for the aging of the baby boomers.**

Our Community:

R. 17: Reauthorize the Older Americans Act Continued

- **Senior Community Service Employment Program—Maintain the dual structure of state, minority and national grantees; retain the vital, historic focus on community services to support local community organizations and the aging network; streamline program eligibility to promote increased participation to meet demographic changes and the growing ethnic and culturally diverse population to include tribal organizations.**

Our Community:

R. 17: Reauthorize the Older Americans Act Continued

- **Family care givers: Support family care giving across all generations regardless of age of care givers or persons needing service.**
- **Support Indian-specific provisions in OAA**
 - **Elevate the Director of American Indian office within the AoA to the Deputy Secretary level**

Our Community:

R. 17: Reauthorize the Older Americans Act Continued

- **Re-establish the occurrence of the Indian White House Conference on Aging prior to the next WHCoA in recognition of the government-to-government relationship between the federal and tribal governments**

Our Community:

R. 17: Reauthorize the Older Americans Act Continued

- **Provide \$1M for elder abuse awareness grants under Title VII Part B for Indian Country**
- **Provide \$1.3M for training and technical assistance for Title VI Directors instead of skimming it off the top of Title VI appropriations**

Our Community:

R. 17: Reauthorize the Older Americans Act

- **Re-establish the occurrence of the Indian White House Conference on Aging prior to the next WHCoA in recognition of the government-to-government relationship between the federal and tribal governments**
- **Provide \$1M for elder abuse awareness grants under Title VII Part B for Indian Country**
- **Provide \$1.3M for training and technical assistance for Title VI Directors instead of skimming it off the top of Title VI appropriations**

Our Community:

R. 17: Reauthorize the Older Americans Act

- **Nutrition Services: Fully integrate nutrition services, such as congregate and home-delivered meals at 3 meals per day, 7 days per week, nutrition education, senior farmers' market nutrition program, screening, assessment, and counseling: through the employ of registered dietitians at the state, AAA, and local levels as well as services extended to caregivers where appropriate.**

Our Community:

- **Res. 14 & 18: Expand Opportunities for Developing Innovative Housing Designs that promote Livable Communities that Enable Aging in Place**
 - **Change zoning and building regulations to allow for good senior housing options including single family housing, congregate living options, shared housing, and public housing.**

Our Community:

- **Res. 14 & 18: Expand Opportunities for Developing Innovative Housing Designs that promote Livable Communities that Enable Aging in Place**
 - Encourage local building codes to require universal design, including, but not limited to wide doorways, turning radiuses, lower light switches, barrier-free showers, grab bars, and good lighting

Res. 14 & 18: Expand Opportunities for Developing Innovative Housing Designs that promote Livable Communities that Enable Aging in Place

- **Change zoning and building regulations to allow for good senior housing options including single family housing, congregate living options, shared housing, and public housing.**
- **Encourage local building codes to require universal design, including, but not limited to wide doorways, turning radiuses, lower light switches, barrier-free showers, grab bars, and good lighting**

Res. 14 & 18: Expand Opportunities for Developing Innovative Housing Designs that promote Livable Communities that Enable Aging in Place

Continued

- **Encourage the incorporation of universal design into new housing for people of all ages and abilities through education and training of builders, developers, designers, local officials, and consumers, and through tax incentives such as tax credits and property tax abatement**

Res. 15: Encourage Redesign of Senior Centers for Broad Appeal and Community Participation

- **Support an expanded role for senior centers as focal points for community based services and civic engagement for senior centers as independent service.**

Res. 15: Encourage Redesign of Senior Centers for Broad Appeal and Community Participation Continued

- **Support policies and encourage efforts to create and expand opportunities and partnerships that integrate senior centers, health care systems, service providers, communities, business, public and private organizations to serve culturally diverse populations across all social and economic lines.**
- **Support efforts to modernize and upgrade facilities and programming that will attract and serve existing and new generations.**

Res. 15: Encourage Redesign of Senior Centers for Broad Appeal and Community Participation (Continued)

- **Create a separate and distinct title in OAA for multipurpose senior centers which are a system serving older adults, caregivers, and their families.**

Res. 15: Encourage Redesign of Senior Centers for Broad Appeal and Community Participation (Continued)

- **There shall be a federal requirement that all 50 states, territories and tribes establish statutes defining “multipurpose senior centers” as THE community based focal point for planning and coordination for the organization and provision for a broad spectrum of services suited to the diverse needs and interests of self determining older persons.**

Res. 19: Create a National Strategy for Promoting Elder Justice Through the Prevention and Prosecution of Elder Abuse

- **Enact and fully fund comprehensive elder justice legislation (The Elder Justice Act) to address elder abuse**
- **Build capacity of Adult Protective Services programs nationwide with specific funds & focus on elder financial abuse exploitation.**
- **Create an Elder Abuse Awareness postage stamp (similar to breast cancer stamp)**

Res. 21 & 22: Ensure that Older Americans Have Transportation Options to Retain Mobility and Independence

- **Require public transportation organizations and local governments to participate in disaster preparedness planning for evacuation of seniors without transportation—funding by the Department of Homeland Security.**

Res. 21 & 22: Ensure that Older Americans Have Transportation Options to Retain Mobility and Independence

Continued

- **Increase public and community transportation investment and include statutory language in the Older Americans Act that increases funding support to the Aging Network to promote senior mobility, expand cost-effective transportation options and facilitate coordination of human service transportation**
- **Better coordination among public and private transportation providers.**

Res. 23 & 24: Enhance the Availability and Affordability of Housing for Older Americans

- Increase the housing supply and housing options for seniors through combinations of governmental initiatives and tax credits encouraging the private sector to provide housing in corporate campuses, as well as by encouraging the revamping of land use laws that inhibit the growth of senior housing.**

Res. 23 & 24:

Enhance the Availability and Affordability of Housing for Older Americans

- **Establish federal housing trust fund of \$500 billion, and other mechanisms such as tax credits, to meet planning and development needs for low income and disabled older adults.**
- **Remove unduly burdensome regulatory obstacles to building senior housing in the community.**

Res. 25:

Encourage the Development of a Coordinated Federal, State, and Local Emergency Response Plan for Seniors in the Event of Public Health Emergencies and Disasters

- **Develop a geographic information system (GIS) for tracking vulnerable individuals, combined with robust wireless communications networks, and global positioning system (GPS) tracking system (opt-in for individuals) for first responders and vulnerable individuals. This can leverage telemedicine technology.**

Res. 25:

Encourage the Development of a Coordinated Federal, State, and Local Emergency Response Plan for Seniors in the Event of Public Health Emergencies and Disasters Continued

- **Clarify role and responsibility areas of federal, state and local governmental entities relative to evacuation procedures, funding to support evacuation, return, restoration, and service provision. Further clarify the relationship of Red Cross, and other relief agencies, with local entities. Develop and incorporate gatekeeper measures for seniors residing in shelters to minimize elder abuse, neglect and exploitation. These measures should be a part of operating guidelines for all shelters.**

Res. 25:

Encourage the Development of a Coordinated Federal, State, and Local Emergency Response Plan for Seniors in the Event of Public Health Emergencies and Disasters (Continued)

- **Create a system for ensuring resources are expended on existing service network.**

Resolution 26: Support Older Adult Caregivers Raising Their Relatives' Children

- **Encourage state school boards, Department of Education, Department of Health and Human Services to allow a relative caregiver without legal custody or guardianship to submit affidavit to enroll child in school and to consent to medical treatment on his or her behalf.**
- **Ensure that government programs, including navigator programs offer an array of services such as: legal, housing, health care, education, advocacy, counseling and respite care.**

Resolution 26: Support Older Adult Caregivers Raising Their Relatives' Children

- **Outreach and education that is culturally and socio-economically sensitive, directed at caregivers, schools and public at large**
- **Provide for adequate funding for grand families,**
 - **Title IVE foster care and for subsidized guardianship**
 - **NFCSP—Lower age limit, increase funding, and support national**
 - **Housing: HUD and NAHASDA and Legacy**
 - **Reauthorization of Indian Healthcare Improvement Act**

Planning Along the Lifespan

Planning Along the Lifespan

- **Several strategies for increasing retirement savings were strongly supported including:**
 - **Promotion of financial literacy as a core curriculum requirement mandatory for a high school diploma, as well as financial education across the lifespan**

Planning Along the Lifespan

Several strategies for increasing retirement savings were strongly supported including continued:

- **Use of the tax code to give further incentive to encourage retirement savings and the purchase of Long Term Care insurance**
- **Make permanent the capital gains tax rate on all distributions – taxable at a rate of 15%**

Planning Along the Lifespan

Several strategies for increasing retirement savings were strongly supported including Continued:

- **A \$1,000 one-time federally-funded birth account unavailable to the beneficiary until reaching Social Security eligibility, making the Saver Credit refundable, repealing or raising the mandatory withdrawal age of 70 ½ , annuitization incentives, and dependent care credit expansion**

Planning Along the Lifespan

Several strategies for increasing retirement savings were strongly supported including Continued:

- **Encourage new savings by enacting or expanding existing savings incentives such as IRAs, 401Ks, 403(b)'s, in order to strengthen the retirement picture for all Americans to include:**

Planning Along the Lifespan

- **Several strategies supported incentives, including changes to Social Security, to keep older Americans in the workforce**
- **Strong objection to totally privatizing social security was expressed in a number of strategies, e.g.:**
 - **“Maintain the entire system without privatization...”**
 - **“Retain the progressive defined benefit structure...”**

Planning Along the Lifespan

- **Some delegates supported privatization on a voluntary basis or with a limit on the proportion of the payroll tax to be put into private accounts:**
 - **“Invest 2% of Social Security into private investment...in addition allow up to 13% of your own taxed income...”**

Planning Along the Lifespan

- **Several strategies supported raising the cap on earnings subject to social security tax or eliminating it altogether.**
- **Support was expressed for expanding Social Security coverage to all workers.**

Planning Along the Lifespan

- **For the social security disability insurance program:**

- **Create incentive and programs to facilitate Return to Work (RTW)**
- **Extend Medicare and Medicaid coverage for period of time after RTW (helps employers & employee.**
- **Create incentives for employers and nonprofits to help beneficiaries RTW**
- **Enhance vocational rehabilitation services for beneficiaries**

Planning Along the Lifespan

- **For the social security disability insurance program Continued:**
 - **Eliminate disincentives for RTW such as**
 - **Short trial work days**
 - **Part-time employment penalties**
 - **Definition of substantial gainful activity**
 - **Create expert resources to adjudicate difficult claims**

Planning Along the Lifespan

- **For the Social Security disability insurance program Continued:**
 - **Streamline the appeals process by using more presumptive awards**
 - **Create financial and medical protection during prolonged appeal process**

Planning Along the Lifespan

- **For the Social Security disability insurance program continued:**
 - **Better exchange of information among disability systems**
 - **Simplify application process**
 - **Create a system of reimbursement for healthcare providers to assist patients in application process**
 - **Eliminate waiting period by**
 - **start cash on onset date**

Planning Along the Lifespan

- For the social security disability insurance program

Continued:

- Make Medicare available on onset date
- Do not take attorney fee from back benefit.

Award attorney fees from separate fund as in Equal Access to Justices Act.

- Provide medical (Social Security Medicare/Medicaid) or private insurance policy early in the claim (by 1st 30 days)

- Develop network of insurance companies (group purchase power)

Planning Along the Lifespan

- Strategies supported for modernizing Supplemental Security Income (SSI) included:
 - Adopt changes proposed in Flemming report that are not inconsistent with the other strategies shown below.
 - Increase benefit to 150% of Federal Poverty Level in 2008. In subsequent years increase monthly benefit 5% each year until it reaches 175% of federal poverty level.

Planning Along the Lifespan

▪ **Strategies supported for modernizing Supplemental Security Income (SSI) included Continued:**

▪ **Increase the earned income exclusion to 25% of the federal poverty level. Liberalize the formulas related to income exclusion of \$65 per month in order to provide incentives for individuals to work and contribute to the program.**

Planning Along the Lifespan

- **Strategies supported for modernizing Supplemental Security Income (SSI) included Continued**
 - **Simplify application process and appeals process with particular attention for those with limited English, low literacy rates, limited cognitive ability and/or emotional disabilities.**

Planning Along the Lifespan

▪ **Strategies supported for modernizing Supplemental Security Income (SSI) included Continued:**

- **Simplify application process and appeals process with particular attention for those with limited English, low literacy rates, limited cognitive ability and/or emotional disabilities.**

Planning Along the Lifespan

- Simplify application process and appeals process with particular attention for those with limited English, low literacy rates, limited cognitive ability and/or emotional disabilities.
 - The Disability Determination Process should be simplified and accelerated to include greater consideration by physicians, geriatricians, therapy specialists (OT, PT, etc.) and the use of functional re-assessments.
 - Establish a quality control review process for denied disability claims.

Planning Along the Lifespan

- Long term care strategies supported include:
 - Flexibility in the use of Medicaid Funds, especially for home and community based care.
 - Financial incentives to individuals & employers for Long Term Care insurance
 - Very strong endorsement of private sector options including partnership for LTC, tax incentives for planning and consumer education.

Planning Along the Lifespan

- Long term care strategies supported include:
 - Medicaid Reform and Single Point of Entry
 - Create Social Insurance program for Long Term Care
 - Expanded long-term care awareness campaign including counseling and insurance

Planning Along the Lifespan

- Prosecution of financial crimes:
 - Enactment of legislation and funding to create rapid response financial abuse specialist teams nationwide to increase prosecution of financial crimes

Health and Long Term Living

Health & Long-Term Living

- **Coordinated LTC Policy; Innovations in Financing; Non-Institutional Options**
- **Care and Services in Rural America**
- **Disease Prevention & Management**
- **Health Information & Technology**
- **Medicaid & Medicare**
- **Geriatric Care Workforce**
- **Strategies to Reduce Healthcare Disparities**

Long-Term Care: Coordinated Policy, Innovations in Financing, & Non- Institutional Options

- **Establish national LTC policy with key features**
 - **comprehensive educational program**
 - **incentives to plan ahead**
 - **partnership involvement with the private sector and all stakeholders**
 - **comprehensive needs assessment**
 - **information services that respect consumer choice**
 - **extensive network of support for services for caregivers.**

Long-Term Care: Coordinated Policy, Innovations in Financing, & Non- Institutional Options

- **Provide states - local communities maximum flexibility under Medicaid, especially in providing “non-institutional” care services. Coordinate with private sector**
- **Provide Single-point-of-entry into LTC**
- **Provide tax incentives for individuals and employers to encourage expansion of the private and group LTC insurance markets**
- **Remove barriers to expansion of LTC Insurance Partnership Program**
- **Integrate financing and services of acute and LTC to achieve savings**

Care and Services in Rural America

- **Adapt & adopt successful models for rural Americans (e.g. PACE).**
- **Regulatory & reimbursement flexibility for current providers to retool for fuller array of services.**
- **Promote communications infrastructure and telemedicine.**
- **Promote services & resources for long-distance caregivers.**
- **Develop long-distance mental health resources & techniques.**

Disease Prevention & Management

- **Have government and other stakeholders collaborate to implement and evaluate evidence-based health promotion initiatives.**
- **Establish a private/public partnership to support a social marketing campaign for disease prevention and healthy lifestyles.**
- **Provide reimbursement/incentives for chronic care management (including medications and behavioral health).**
- **Demonstrations to develop evidence-based practices.**

Health Information & Technology

- **Standardize the technology of health information records to facilitate interoperable electronic exchange of health, long-term care, disability, and wellness information.**
- **Establish incentives for implementation of health information technology across all settings.**

Health Information & Technology Continued

- **Apply health information technology to disease prevention, chronic care management, and advance directives.**

Medicaid

- **Create a seamless system incorporating the full health & LTC continuum, including non-medical program services**
 - **Eliminate Medicaid's institutional biases/eliminate need for waivers**
- **Emphasize government & private sector working together to promote personal responsibility for health & LTC.**
 - **Such as the Partnership Program that links asset protection to the level of private LTC insurance benefits paid.**

Medicaid

- **Have reimbursements equal the costs of care. No caps! No Block Grants!**
- **Mandate simplification of the eligibility process enforce OBRA '87**
- **Funding parity for mental health**
- **Full federal funding responsibility for dual eligibles**

Medicare

- **Enhanced emphasis on emerging preventative services.**
- **Expand benefits: dental, vision, mental health, substance abuse and hearing loss.**
- **Simplify Part D to one prescription drug program for everyone, based on government negotiated prices.**
- **Create a comprehensive, lifetime LTC benefit for all Americans of all ages (e.g. Part E).**

Geriatric Workforce

- **Reinstate and increase Title VII funding to support geriatric education and career support programs.**
- **Have states provide financial incentives and career ladders to support the recruitment, training and retention of geriatric direct care workers.**

Geriatric Workforce Continued

- **Provide federal/state financial incentives to support advanced training and cultural competence in geriatric medicine, mental health, social work, nursing and dentistry.**

Strategies to Address Healthcare Disparities

- **Work with appropriate accrediting bodies to develop cultural competence curriculum for geriatric and other health-related training.**
- **Eliminate barriers to healthcare access arising in connection with:**
 - **Gender**
 - **Race**
 - **Ethnicity**
 - **GLBT**

Strategies to Address Healthcare Disparities Continued

- **Promote and support community-based participatory research to identify best practices for older adults of various races, ethnicities, and cultures.**

Develop Innovative Strategies

- Healthy Nutrition
- Healthier Lifestyles
- Care for Veterans in all Settings
- Responsiveness to Mental Illness
- Innovations in Aging Research
- Improved patient Advocacy to Assist in all Care Settings
- Issue Surrounding End of Life Care
- Healthcare for Indian Tribes
- Health Education and Health Literacy

Civic and Social Engagement

Policy Track Outline

Track 5: Civic Engagement and Social Engagement

Resolution 56: Develop a National Strategy for Promoting New and Meaningful Volunteer Activities and Civic Engagement Activities

Resolution 59: Reauthorize the National and Community Service Act to Expand Opportunities for Volunteer and Civic Engagement Activities

Track 5: Civic Engagement and Social Engagement

- **Simultaneous with reauthorizing the National and Community Service Act (NCSA), reauthorize the Domestic Volunteer Service Act (DVSA), with the following provisions:**
 - **Double** total number of Foster Grandparents (FG), Senior Companions (SC), and RSVP volunteers to 1 million by 2010.
 - **Expand** RSVP program to every county in the nation, including tribal organizations.

Track 5: Civic Engagement and Social Engagement

- **Simultaneous with reauthorizing the National and Community Service Act (NCSA), reauthorize the Domestic Volunteer Service Act (DVSA), with the following provisions Continued:**
 - **Increase** income eligibility cap for FG/SC programs from 125% to 200% of national poverty level.
 - **Lower** eligibility age for FG/SC programs to 55 (from 60) to recruit leading-edge boomers.

Track 5: Civic Engagement and Social Engagement

- **Expand Older Americans Act:**
 - Integrate Civic Engagement into the OAA and the established aging network.
 - Enable senior centers to provide transition planning programs for baby boomers, and pilot projects through Title IV grants.

Track 5: Civic Engagement and Social Engagement

- **Create Incentives:**
 - Fund the *Silver Scholarships* program, a \$1,000 tax-free transferable education award, for older adults who serve 600+ hours per year.
 - Provide tax credits for volunteer time and expenses.

Track 5: Civic Engagement and Social Engagement

- **Remove Barriers:**
 - Eliminate volunteer driver liability to both encourage volunteer drivers and to help volunteers access opportunities.
 - Expand home-based volunteer opportunities in addition to transportation assistance for disabled Americans.

Track 5: Civic Engagement and Social Engagement

- **Promote Corporate Citizenship:**
 - Provide subsidies, tax credits, and other incentives to encourage the business community to expand and reward volunteer opportunities for their employees and retirees.

Track 5: Civic Engagement and Social Engagement

- **Presidential Commission:**
 - President to establish a national commission to develop a blueprint for tapping boomers and older adults as social capital.
Commission to include broad representation from private and public sector.

Track 5: Civic Engagement and Social Engagement

- **Fund for Innovation:**
 - Establish a fund for innovation to foster the growth of promising practices and program models that promote volunteering by boomers and older adults to address critical human and community needs.

Track 5: Civic Engagement and Social Engagement

- **Launch a National Volunteering Campaign:**
 - Develop a national marketing and communication strategy to stimulate a new spirit of volunteerism.
 - Create a national online clearinghouse that matches volunteer skills and experience with volunteer needs.
 - Establish a standard toll-free number, such as the “211” Hotline, to link/match volunteers with local volunteer opportunities.

Technology and Innovation in the Marketplace

Promote the Integration of Health and Aging Services to Improve Access and Quality of Care for Older Americans (Resolution 61)

- Update Medicare to place greater emphasis on establishing cost-effective linkages to home and community based options through the Aging Network to promote chronic disease management, and increase health promotion and disease prevention measures.

Promote the Integration of Health and Aging Services to Improve Access and Quality of Care for Older Americans Continued (Resolution 61)

- Ensure access to health/aging services by all senior populations through the establishment of a new Title under the OAA to create Aging and Disability Resource Centers (ADRCs) as a single point of entry in each region across the nation charged to coordinate health and aging programs and ensuring access to diverse populations.

- Include in OAA provisions to foster development of a virtual electronic component data base that is shared between providers (i.e., medical, health, social services) – especially home and community based services.
- Create a standard set of definitions and codes for a healthcare and wellness record to allow easier interfaces between multiple information systems and establish reimbursement incentives for systems that incorporate these standardized definitions and codes.

- Facilitate improved standardized information and exchange/communication among providers—health records, billing, and other forms/paperwork.
- Identify, assess, and address federal and individual state regulations that prevent sharing information between systems.
- Amend HIPAA and other restrictive regulations to allow meaningful communication between health providers and the aging network regarding client care.

Develop Incentives to Encourage the Expansion of Appropriate Use of Health Information Technology (Resolution 62)

- Advance the adoption of technology for enhancing the effectiveness and efficiency of the healthcare workforce through such financial incentives as:
 - Expanded Medicare/Medicaid coverage for telehealth
 - Reduced cost of malpractice insurance
 - Reduced licensing fees
 - Low interest loans
 - Tax credits
 - Sales tax exemptions
 - Private sector awards

- Include incentives for HIT adoption in rural and medically- underserved areas
- Increase accessibility to and decrease cost of health information technology by reviewing regulations such as HIPAA, fraud prevention, anti-kickback and Stark restrictions to facilitate deployment of such technology.
- Improve reimbursement policies to encourage investment in and use of Health Information Technology

- Fully fund American Health Information Community and the Office of the National Coordinator for Health Information Technology
- Establish a national commission for advancing health information technology in such areas as:
 - Common standard of data exchange
 - Electronic health records and standards
 - Interstate healthcare and reimbursement
 - Competitiveness through innovation (research and development)
 - Incentives for technology adoption and education (providers and consumers)

Cross-Cutting Issues

Cross-Cutting Issues

- Charge National Academy of Public Administration to review alignment of programs for older Americans and provide recommendations to the Domestic Policy Council

Cross-Cutting Issues

- Incorporate key principles in administrative action and legislative proposals:
 - Coordinated longitudinal services across the spectrum of medical and social services including housing, transportation, caregiver support, nutrition and medical care
 - Integration of funding streams
 - Pay for performance for continuity of care
 - Consolidation of data bases
 - On-going evaluation incorporating technological innovation

Crossing-Cutting Issues

- **Integrate delivery systems to meet 21st Century needs by creating a new title in the OAA “Community Preparedness for an Aging Population”. This would support AAA’s to assist cities, counties, tribal councils as well as the private sector to address the needs of older adults in the areas of housing and transportation, health, human services, public safety, recreation, and workforce development. The goal is to ensure “aging well in livable communities”**

Crossing-Cutting Issues Continued

- **Encourage design for an aging society that is the standard rather than the exception including: housing design; accessibility; building codes; signage; transportation;**
- **Create 20 funded model integrated networks in various types of communities to serve as models for the country.**

Cross-Cutting Issues

- **Ensure accountability for implementation of the 2005 WHCoA recommendations by securing Congressional and other support, including funding, for a Bipartisan Commission.**
- **Make records and documentation from the WHCoA available and the White House should recognize the work of the WHCoA.**
- **Conduct an evaluation of the 2005 WHCoA by surveying delegates.**

Cross-Cutting Issues Continued

- **Delegates should continue the work of the 2005 WHCoA within their state by convening meetings to disseminate the recommendations, implement strategies and obtain grassroots support.**
- **Consider the concept of convening a Native American WHCoA.**

Cross-Cutting Issues

- **Develop a national strategy for supporting informal caregivers**
- **Offer a range of financial and other incentives to encourage caregiving such as: tax credits; affordable healthcare; public disability insurance; credit for time for social security; inflation protection for peak earnings; respite care**

Cross-Cutting Issues Continued

- **Double the \$162 million appropriations level for the National Family Caregiver Support Program and include aging caregivers of adults with lifelong disabilities and expand the definition of “caregiver” to include friends and neighbors.**
- **Permanently authorize the Aging and Disability Resource Centers through the OAA to be supportive resource centers for caregivers.**

Top Ten 2005 WHCoA Resolutions (By Resolution Number)

- R 17 – Reauthorize OAA**
- R 22 – Ensure Older Americans Have Transportation Options**
- R 30 – Develop a Comprehensive LTC Strategy**
- R-36 – Improve Recognition, Assessment, and Treatment of MI/Depression Among Older Americans**
- R-40 – Attain Adequate Numbers of Healthcare Personnel**
- R-41 – Support Geriatric Education and Training**
- R-42 – Promote Innovative Models of Non-institutional LTC**
- R-50 – Strengthen/Improve the Medicaid Program**
- R-51 – Strengthen/Improve the Medicare Program**
- R-71 – Improve State/Local Based Service Delivery Systems**